ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MW		07-08-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	HB	JC-916	09-28-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
–	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim			Date		Claim		Date		Claim		Date
Final	Original				Final	Original		Final	Original	
	1				51			101		
	2				52			102		
	3				53			103		
	4				54			104		
	5				55			105		
	6				56			106		
	7				57			107		
	8	✔			58			108		
	9	N			59			109		
	10	N			60			110		
	11	✔			61			111		
	12	✔			62			112		
	13	✔			63			113		
	14	✔			64			114		
	15	✔			65			115		
	16	N			66			116		
	17	N			67			117		
	18	N			68			118		
	19				69			119		
	20				70			120		
	21				71			121		
	22				72			122		
	23				73			123		
	24				74			124		
	25				75			125		
	26				76			126		
	27				77			127		
	28				78			128		
	29				79			129		
	30				80			130		
	31				81			131		
	32				82			132		
	33				83			133		
	34				84			134		
	35				85			135		
	36				86			136		
	37				87			137		
	38				88			138		
	39				89			139		
	40				90			140		
	41				91			141		
	42				92			142		
	43				93			143		
	44				94			144		
	45				95			145		
	46				96			146		
	47				97			147		
	48				98			148		
	49				99			149		
	50				100			150		

If more than 150 claims or 10 actions
staple additional sheet here

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